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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/730,493			ing Date 08/2003	☐ To be Mailed
	' AF	PPLICATION A	S FILE	SMALL	OTHER THAN SMALL ENTITY OR SMALL ENTITY							
FOR NUMBER				LED NUM		BER EXTRA ,		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			ŅΆ			N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), c	or (m))	N/A		N/A			N/A			N/A	
	EXAMINATION FE (37 CFR 1.18(o). (p).		N/A		N/A			N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•			x \$ =		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =		•			x \$ =			x s =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheet is \$25 additi	s of pape 50 (\$125 onal 50 s	er, the app for small e sheets or fi	d drawings exceed 100 application size fee due all entity) for each or fraction thereof. See and 37 CFR 1.16(s).					-	,	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
" If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		•	TOTAL	
APPLICATION AS AMENDED – PART II OTHER THA (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL EN												
AMENDMENT	07/27/2007	CLAIMS REMAINING AFTER AMENDMENT	٠	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 35	Minus	<b></b> 35		= 0		x \$ =		OR	X \$50=	0
	Independent (37 CFR 1.16(h))	• 4	Minus	***4		= 0		x \$ =		OR	X \$200=	0
	Application Size Fee (37 CFR 1.16(s))											
,	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)												
AMENDMENT	8/10/07	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 35	Minus	٠ ج	5	= <i>(</i> )		X \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(h))	. 4	Minus	***	$\overline{4}$	= 0		x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))											
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR		X
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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